|  |  |   |              |                                   |                  |                  |          | Application or Docke: Number |                        |               |                     |                        |  |
|--|--|---|--------------|-----------------------------------|------------------|------------------|----------|------------------------------|------------------------|---------------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECO<br>Effective October 1, 2003   |  |   |              |                                   |                  |                  |          | D/500915                     |                        |               |                     |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column:2)   |  |   |              |                                   |                  |                  |          | SMALL I                      | ENTITY                 | ·OR           |                     | R THAN<br>ENTITY       |  |
| TOTAL CLAIMS   |  |   | 31           | 31                                |                  |                  |          | RATE                         | FEE                    | 7             | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED |                                   | NUMBER EXTRA     |                  |          | BASIC FE                     | E 385.00               | OR            | BASIC FEE           | 920                    |  |
| TC   | OTAL CHARGE                                    | ABLE CLAIMS                               | 3/ mi        | 3 minus 20=                       |                  | - 11             |          | XS 9=                        |                        | OR            | XS18=               | 198                    |  |
| INDEPENDENT CLAIMS   |  |   | minus 3 =    |                                   | •                |                  |          | X43=                         |                        | OR            | X86=                |                        |  |
| ž  | JLTIPLE DEPE                                   | NDENT CLAIM P                             | RESENT       | N                                 |                  |                  |          | +145=                        |                        | OR            | ÷290=               |                        |  |
| • If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |              |                                   |                  |                  | ı        | TOTAL                        | 1                      | OR            | TOTAL               | 1118                   |  |
| 7-8-04 CLAIMS AS AMENDED - PART II   |  |   |              |                                   |                  |                  |          |                              | <del></del>            | ٠- د          | OTHER               | THAN                   |  |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                                   |                  |                  |          | SMALL                        | ENTITY                 | OR            | SMALL               |                        |  |
| MTA  | · ·  | CLAIMS<br>REMAINING<br>AFTER              |              | HIGHI<br>NUME<br>PREVIO           | BER              | PRESENT<br>EXTRA |          | RATE                         | ADDI-<br>TIONAL<br>FEE |               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| NE NE  |  | AMENDMENT                                 | Minus        | PAID                              | UH               | -                |          | XS 9=                        | 1                      | 1             | XS18=               |                        |  |
| AMENDMENT  | Total  | 50 01                                     | Minus        |                                   |                  | =                | $\vdash$ | V2 3=                        | -                      | OR            |                     |                        |  |
| AM   | Independent                                    | INTATION OF M                             |              | PENDENT                           | CLAIM            |                  |          | X43=                         |                        | <del>OR</del> | X8 <u>6</u> =       |                        |  |
| Щ.   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                                   |                  | اا               | '        | +145=                        |                        | OR            | +290=               |                        |  |
|  |  |   |              |                                   | •                | •                | L        | TOTAL                        |                        | OR            | TOTAL               |                        |  |
|  | (Column 1) (Column 2) (C                       |   |              |                                   |                  | (Column 3)       | A        | DDIT. FEE                    |                        |               | ADDIT. FEE          |                        |  |
|  | (Column 1) CLAIMS                              |   | HIĞH         |                                   |                  |                  |          |                              | ADDI-                  | 1 1           |                     | ADDI-                  |  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |              | PREVIO<br>PAID F                  | USLY             | PRESENT<br>EXTRA |          | RATE                         | TIONAL<br>FEE          |               | RATE                | TIONAL<br>FEE          |  |
| WQ   | Total  | •   | Minus        | -                                 |                  | -                |          | X\$ 9=                       | . 1                    | OR            | X\$18=              |                        |  |
| NEW TEN  | Incependent                                    | •   | Minus        | ***                               |                  | =                | <b> </b> | X43=                         | 1                      |               | X86=                |                        |  |
| Ā  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                                   |                  |                  | <b> </b> | ,,,,,,,                      | <del> </del>           | OR            |                     | ,                      |  |
|  |  | •   |              |                                   |                  |                  |          | +145≃                        | ·                      | OR            | +290=               |                        |  |
|  |  |   |              |                                   |                  |                  | Αſ       | TOTAL<br>DDIT. FEE           |                        | OR            | TOTAL<br>ADDIT, FEE |                        |  |
|  | (Column 1) (Column 2) (Column 3)               |   |              |                                   |                  |                  |          |                              | •                      |               |                     |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·            | HIGHE<br>NUMB<br>PREVIO<br>PAID F | ST<br>ER<br>USLY | PRESENT<br>EXTRA | Γ        | RATE ·                       | ADDI-<br>TIONAL<br>FEE |               | RATÉ                | ADDI-<br>TIONAL<br>FEE |  |
| ĬŽ.  | Total  | AMENDMENT                                 | Minus        | **                                |                  | <b>a</b> .       |          | X\$ 9=                       | , , , ,                |               | X\$18=              |                        |  |
|  | Independent                                    | 'e- ,                                     | Minus        |                                   |                  | = .              | -        |                              |                        | OR            |                     |                        |  |
| A  |  | NTATION OF ML                             | <u> </u>     | <u>L</u>                          | CLAIM            |                  |          | X43=                         |                        | OR            | X86=                | ·                      |  |
| ـــا   | · · · · · · · · · · · · · · · · · · ·          |   |              |                                   |                  | <del></del>      |          | +145=                        |                        | OR            | +290=               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |                                   |                  |                  |          |                              |                        |               |                     |                        |  |